Test Type: 14-DAY
Route: DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole

CAS Number: 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

C Number: C92013

Lock Date: 01/12/1995

Cage Range: All

Date Range: All

Reasons For Removal:

Removal Date Range: All

Treatment Groups: All

Study Gender: Both

PWG Approval Date NONE

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole CAS Number: 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

CID NUMBER INDIVIDUAL ANIMAL NO. HISTO NUMBER NMBR OF SLIDES WET TISSUE 1 00001 MB200G-1	SPECIES: Rat		STRAIN: F 344/N				SEX: MALE	DOSE LEVEL: VEHICLE CONTRO	
2 00002 MB200G-2 Y N 3 00003 MB200G-3 Y N 4 00004 MB200G-4 Y N	CID NUMBER								
3 00003 MB200G-3 Y N 4 00004 MB200G-4 Y N	1	00001	MB200G-1			ΥN			
4 00004 MB200G-4 Y N	2	00002	MB200G-2			ΥN			
	3	00003	MB200G-3			ΥN			
5 00005 MB200G-5 Y N	4	00004	MB200G-4			ΥN			
	5	00005	MB200G-5			ΥN			

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)	_		(SIGNATURE)	(DATE)				

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole **CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

	SPECIES: Rat		STRAIN: F 344/N				SEX: MALE	DOSE LEVEL: 2500 PPM
17 00017 MB200G-17	CID NUMBER							
18 00018 MB200G-18 Y N 19 00019 MB200G-19 Y N	16	00016	MB200G-16			ΥN		
19 00019 MB200G-19 Y N	17	00017	MB200G-17			Y N		
	18	00018	MB200G-18			ΥN		
20 00020 MB200G-20 Y N	19	00019	MB200G-19			ΥN		
	20	00020	MB200G-20			ΥN		

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)			(SIGNATURE)	(DATE)				

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole **CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

ECIES:	Rat	STRAIN: F 344/N				SEX: MALE	DOSE LEVEL: 800 PPM
CID NUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE		
	00011				ΥN		
	00012				ΥN		
	00015				YN		
	00014				Y N		
	00013				ΥN		

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)	<u> </u>	(SIGNATURE)	(DATE)					

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole **CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

PECIES:	Rat		STRAIN: F 34	44/N		SEX: MALE	DOSE LEVEL: 300 PPM
CID NUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE		
	00006				ΥN		
	00007				ΥN		
	00010				ΥN		
	00009				ΥN		
	80000				ΥN		

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)	_		(SIGNATURE)	(DATE)				

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole **CAS Number:** 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

SPECIES:	Rat	STRAIN: F 344/N				SEX: FEMALE	DOSE LEVEL: VEHICLE CONTROL
CID NUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE		
21	00021	MB200G-21			ΥN		
22	00022	MB200G-22			ΥN		
23	00023	MB200G-23			Y N		
24	00024	MB200G-24			Y N		
25	00025	MB200G-25			ΥN		

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)	_		(SIGNATURE)	(DATE)				

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole CAS Number: 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

SPECIES: Rat		STRAIN: F 344/N				SEX: FEMALE	DOSE LEVEL: 300 PPM
CID NUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE		
30	00030	MB200G-30			ΥN		
	00027				ΥN		
	00029				ΥN		
	00026				ΥN		
	00028				ΥN		

EVIEWED BY REPOSITORY SUPERVISOR									
(INITIALS)	(DATE)		(SIGNATURE)	(DATE)					

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

Test Compound: 4-Methylimidazole CAS Number: 822-36-6

Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

SPECIES: Rat		STRAIN: F 344/N			SEX: FEMALE		DOSE LEVEL: 800 PPM	
CID IUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE			
31	00031	MB200G-31			ΥN			
34	00034	MB200G-34			ΥN			
	00035				ΥN			
	00032				ΥN			
	00033				ΥN			

REVIEWED BY REP	OSITORY SUPERVISOR			
(INITIALS)	(DATE)	_	 (SIGNATURE)	(DATE)

Test Type: 14-DAY **Route:** DOSED FEED

Species/Strain: Rat/F 344/N

P15: TDMS SLIDE/BLOCK INVENTORY

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Date Report Requested: 10/22/2014 Time Report Requested: 06:25:25

First Dose M/F: NA / NA

Lab: MBA

SPECIES: Rat		STRAIN: F 344/N			SEX: FEMALE		DOSE LEVEL: 2500 PPM	
CID NUMBER	INDIVIDUAL ANIMAL NO.	HISTO NUMBER	NMBR OF SLIDES	NMBR OF BLOCKS	WET TISSUE			
36	00036	MB200G-36			ΥN			
37	00037	MB200G-37			ΥN			
38	00038	MB200G-38			ΥN			
39	00039	MB200G-39			ΥN			
40	00040	MB200G-40			ΥN			

REVIEWED BY RE	POSITORY SUPERVISOR			
(INITIALS)	(DATE)	_	(SIGNATURE)	(DATE)